

**DEPARTMENT OF LABOR  
JOB OPPORTUNITY  
LABOR DEPARTMENT VETERANS EMPLOYMENT OUTREACH WORKER (SH17)**

**PLEASE FOLLOW THE SPECIFIC APPLICATION FILING INSTRUCTIONS AT THE BOTTOM OF THIS PAGE!**

**Open To:** The Public (Qualified Veterans) - \*Pursuant to Title 38 U.S.C. first preference for hiring will be for qualified disabled veteran and then qualified veteran.

**Location:** Waterbury, 249 Thomaston Avenue

**Job Posting No:** 748

**Hours:** 8:00 a.m. to 4:30 p.m.

**Salary:** \$48,731, plus fringe benefits.

**Closing Date:** November 18, 2016, close of business

Individuals interested in being considered for this position must be a qualified veteran\* and meet the general experience requirement outlined below:

**General Experience:** Five (5) years of experience in veterans services or employment placement and counseling.

**Substitution Allowed:** College training may be substituted for the General Experience on the basis of fifteen (15) semester hours equaling one-half (1/2) year of experience to a maximum of four (4) years.

**Examples of Duties -** Provides specialized services to veterans and other eligible persons; develops jobs and job training opportunities through contact with employers especially small and medium size private sector employers; develops apprenticeship and other on-the-job training positions for veterans through consultation with United States Department of Veterans Affairs; performs outreach activities to locate veterans through local veterans organizations, regional workforce boards and community based organizations; provides instruction and guidance to groups and organizations receiving federal funds for providing employment and training opportunities to veterans; provides appropriate instruction to Department of Labor staff regarding responsibility to veterans; consults and coordinates with other appropriate representatives of federal, state and local programs for purpose of developing linkages to promote employment opportunities to veterans; develops programs in cooperation with appropriate Department of Veteran Affairs personnel, educational institutions and employers to ensure maximum assistance to disabled veterans who have completed or are participating in a vocational rehabilitation program; refers veterans to training, supportive services and educational programs as appropriate; secures and maintains current information regarding available employment and training opportunities using information technology; identifies and assists veterans with barriers to employment such as job retention or readjustment problems utilizing case management techniques; assists in identifying and acquiring prosthetic and sensory aids and devices needed to enhance the employment opportunities and/or employability of veterans and other eligible persons; provides information on programs, procedures, policies, laws and regulations as appropriate; performs related duties as required.

**Special Requirements:** Incumbents in these positions may be required to travel

**Note:** The filling of these positions will be in accordance with reemployment, SEBAC, transfer, promotion and merit system rules.

**Application Instructions:** Interested and qualified candidates who meet the above requirements should submit a current State of Connecticut Application for Examination or Employment (CT-HR-12) and the Connecticut Department of Labor Pre-Authorization and Release form (immediately follows this job announcement), which includes a statement regarding the Guide to the Code of Ethics for Public Officials and State Employees. The CT-HR-12 can be downloaded at [http://das.ct.gov/HR/Forms/CT-HR-12\\_Application.pdf](http://das.ct.gov/HR/Forms/CT-HR-12_Application.pdf). You should also include a copy of your DD-214 and a copy of your official transcript if you are substituting college training for any of the General Experience requirement. If any of these materials are not available at the time that you submit your application, you may still be considered for an interview, however, you cannot be considered for appointment until we have received all of the necessary documentation. Applications received or postmarked after the closing date will not be considered. Submit via mail or fax to:

**Department of Labor  
Human Resources Office  
200 Folly Brook Boulevard  
Wethersfield, CT 06109  
FAX (860) 263-6699**

If you are faxing your application, please do not mail additional copies. **Due to the large number of expected applicants we cannot confirm receipt of application materials.** Not all individuals who apply will be granted an interview.

**AN AFFIRMATIVE ACTION/EQUAL OPPORTUNITY EMPLOYER**

The State of Connecticut is an equal opportunity/affirmative action employer and strongly encourages the applications of women, minorities, persons with disabilities and veterans.

CONNECTICUT DEPARTMENT OF LABOR  
Pre-Employment Screening – Authorization and Release

Completion of this form is voluntary; however, if consent to obtain this information is not given, it may have an adverse effect on your employment opportunities with the Connecticut Department of Labor.

Applicant’s Name (Last, First, Middle): \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
\_\_\_\_\_

Home Phone Number: (    ) \_\_\_\_\_

I, the undersigned, recognize and understand that this constitutes my consent and authorization to disclose or furnish any relevant and necessary information or records to the Department of Labor concerning my character, employment, or military service as may be necessary for a determination of my suitability for employment with the Commission on Human Rights & Opportunities.

This authorization is executed with the full knowledge and understanding that the Labor Department will take measures to protect the aforementioned information against unauthorized disclosure to any parties not having a legitimate need for it in the discharge of the official business of the Department of Labor.

I hereby RELEASE any respondent from any and all liability for damages resulting from a decision by the Department of Labor not to employ me on account of compliance, or any attempts at compliance with this authorization, except for any damages resulting from knowingly providing false or misleading information or records about me.

A copy of this authorization shall be as effective and valid as the original. This authorization shall be valid for twelve (12) months from the date of my signature.

\_\_\_\_\_  
Date Signed

\_\_\_\_\_  
Signature

As a candidate being considered for employment at the Connecticut Department of Labor, I have reviewed a copy of the Guide to the Code of Ethics for Public Officials and State Employees\*.

\_\_\_\_\_  
Date Signed

\_\_\_\_\_  
Signature

\*A copy of the Guide to the Code of Ethics for Public Officials and State Employees may be obtained at the following link: [http://www.ct.gov/ethics/lib/ethics/guides/public\\_officials\\_guide\\_10.pdf](http://www.ct.gov/ethics/lib/ethics/guides/public_officials_guide_10.pdf)

**\*\*Important Note: Any modifications to this form WILL NOT be accepted.**